Image# 13964437898 PAGE 1 / 15

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

								Office Us	se Only	
1. NAME COMM	OF T NITTEE (in full)	TYPE OR F	PRINT ▼		mple: If typing the lines.	ng, type	12FE4	M5		
North C	Carolina Hospital	Associa	ation Poli	tical Actic	n Commi	ttee - Fed	eral			1
ADDRESS	(number and street)	P.O. Box	4449							
	heck if different									
	an previously ported. (ACC)	Cary					NC NC	27519)-4449 –	
2. FEC I	DENTIFICATION NUI	MBER ▼		CITY 🛦		S	STATE 🛦		ZIP COI	DE 🛦
С	C00194647		;	3. IS THIS REPORT	\ \ \	NEW N) OR		AMENDED (A)		
	E OF REPORT se One)	(b) Mon	ort	Feb 20 (M2)		May 20 (M5)	A	ug 20 (M8)		Nov 20 (M11) (Non-Election Year Only)
(a) Q	uarterly Reports:	Due	On:	Mar 20 (M3)		Jun 20 (M6)	S	Sep 20 (M9)		Dec 20 (M12) (Non-Election Year Only)
п	April 15			Apr 20 (M4)		Jul 20 (M7)		Oct 20 (M10)		Jan 31 (YE)
	Quarterly Report (Q1) (c)	12-Day		Primary (12F	?)	Gene	ral (12G)		Runoff (12R)
	July 15 Quarterly Report (Q2	2)	PRE-Election Report for th		Convention (120)	Sneci	al (12S)		
	October 15 Quarterly Report (Q3	3)	rioport for ti		Convention	120)	Ороси	ui (120)		
	January 31 Year-End Report (YE		E	lection on	M M /	D D /	Y Y Y Y	Y	in the State of	
×	July 31 Mid-Year Report (Non-election Year Only) (MY)	(d)	30-Day POST-Election		General (300	G)	Runo	ff (30R)		Special (30S)
	Termination Report (TER)		Report for the	ie.	M = M /	D - D /	Y II Y II Y	Y	in the	
	(1211)		E	lection on					State of	
5. Coveri	ng Period 01	/ 01		013	through	M M	/ D D 30	20′	13	
I certify tha	at I have examined this	Report a	nd to the be	st of my kno	wledge and I	belief it is true	e, correct	and complet	te.	
_	int Name of Treasurer	Mr. Cody								
							M	M / D	D /	Y
Signature o	of Treasurer Mr. Co	ody Hand			[Electronically	y Filed] Da	ate 0	7 23		2013
NOTE: Sub	mission of false, erroned	ous, or inco	omplete inforr	nation may su	bject the per	son signing th	is Report t	o the penalti	es of 2 L	J.S.C. §437g.
	Office							FEC	FOR	M 3X
	Use Only								Rev. 12/20	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

North Carolina Hospital Association Political Action Committee - Federal

2013 06 30 2013 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 49771.65 January 1, 2013 (b) Cash on Hand at 49771.65 Beginning of Reporting Period..... 40425.15 40425.15 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 90196.80 90196.80 6(a) and 6(c) for Column B)..... 122000.00 122000.00 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period -31803.20 -31803.20 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

North Carolina Hospital Association Political Action Committee - Federal

I. Receipts Itions (other than loans) From: ividuals/Persons Other an Political Committees Itemized (use Schedule A) Unitemized TOTAL (add Lines 11(a)(i) and (ii) itical Party Committees	7566.60 7566.55 40425.15 0.00	COLUMN B Calendar Year-to-Date 7566.60 32858.55
ividuals/Persons Other an Political Committees Itemized (use Schedule A) Unitemized TOTAL (add Lines 11(a)(i) and (ii) itical Party Committees	32858.55 40425.15	32858.55
unitemized (use Schedule A) Unitemized TOTAL (add Lines 11(a)(i) and (ii) itical Party Committees	32858.55 40425.15	32858.55
Unitemized (use Schedule A) Unitemized TOTAL (add Lines 11(a)(i) and (ii) itical Party Committees per Political Committees	32858.55 40425.15	32858.55
Unitemized TOTAL (add Lines 11(a)(i) and (ii) itical Party Committees per Political Committees	32858.55 40425.15	32858.55
TOTAL (add Lines 11(a)(i) and (ii) itical Party Committees	40425.15	
Lines 11(a)(i) and (ii) itical Party Committees er Political Committees		
ner Political Committees	0.00	40425.15
		0.00
ch as PACs)	0.00	0.00
al Contributions (add Lines		
a)(iii), (b), and (c)) (Carry		
als to Line 33, page 5)▶	40425.15	40425.15
rs From Affiliated/Other		
ommittees	0.00	0.00
	0.00	0.00
ns Received	0.00	0.00
epayments Received	0.00	0.00
· ·	0.00	0.00
s of Contributions Made	7	
ral Candidates and Other		
	0.00	0.00
	7	
· ·	0.00	0.00
s from Non-Federal and Levin Funds		
	0.00	0.00
,	7	, , , , , ,
n Funda (from Cahadula HF)	0.00	0.00
Ti Fullus (IIOIII Schedule HS)		5.00
Transfers (add 18(a) and 18(b))	0.00	0.00
	a)(iii), (b), and (c)) (Carry als to Line 33, page 5)	a) (iii), (b), and (c)) (Carry als to Line 33, page 5)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. Oper	ating Expenditures: Allocated Federal/Non-Federal	1000 11100	Valeridai 16ai-10-Date
	Activity (from Schedule H4)		
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
(b)	Other Federal Operating		
	Expenditures	0.00	0.00
	Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00
	sfers to Affiliated/Other Party		
	mittees	0.00	0.00
Fede	ributions to eral Candidates/Committees Other Political Committees	122000.00	122000.00
Indep	pendent Expenditures		
	Schedule E)dinated Party Expenditures	0.00	0.00
(2 U.	S.C. §441a(d)) Schedule F)	0.00	0.00
(doc	Conodulo 1 /		
Loan	Repayments Made	0.00	0.00
Loan	s Made	0.00	0.00
Refu	nds of Contributions To: Individuals/Persons Other		
(4)	Than Political Committees	0.00	0.00
(b)	Political Party Committees	0.00	0.00
	Other Political Committees	7 7 7	
	(such as PACs)	0.00	0.00
(d)	Total Contribution Refunds		
` '	(add Lines 28(a), (b), and (c))▶	0.00	0.00
	(444 200 20(4), (5), 44 (6),		
Othe	r Disbursements	0.00	0.00
Fede	eral Election Activity (2 U.S.C. §431(20))		
	Allocated Federal Election Activity		
	(from Schedule H6)		
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	Federal Election Activity Paid Entirely		
	With Federal Funds	0.00	0.00
(c)	Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
	σο(α)(η, σο(α)(η) απα σο(υ)) •	7	3.00
	Disbursements (add Lines 21(c), 22,		
23, 2	24, 25, 26, 27, 28(d), 29 and 30(c))	122000.00	122000.00
	Federal Disbursements		
	ract Line 21(a)(ii) and Line 30(a)(ii)		
from	Line 31)▶	122000.00	122000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	40425.15	40425.15
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	40425.15	40425.15
86. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
88. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

Use separate schedule(s) for each category of the Detailed Summary Page

FOR I	LINE N	UMBER	:	PAGE	6	OF	15
(check	conly o	ne)					
X 1	1a	11b		11c	12		
1	3	14		15	16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) North Carolina Hospital Asso	ciation Political Action Committee - I	Federal
Full Name (Last, First, Middle Initial) Mr. James E. Hauge Mailing Address 4800 Rhythm Drive		Date of Receipt
	State 7in Code	03 08 2013
City Apex	State Zip Code NC 27539-5789	Transaction ID : 21000437 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer North Carolina Hospital Association	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. Stephen Lawler Mailing Address 3905 Cantata Drive		Date of Receipt
City Greenville FEC ID number of contributing	State Zip Code NC 27858-6066	03 08 2013 Transaction ID: 21000441 Amount of Each Receipt this Period 300.00
federal political committee. Name of Employer Vidant Medical Center	Occupation President	300.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) C. Ms. Millie Harding		Date of Receipt
Mailing Address 1113 Pearson Farms Road	d	03 22 2013
City Apex	State Zip Code NC 27502-6741	Transaction ID : 21000473 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer North Carolina Hospital Association	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	900.00
TOTAL This Period (last page this line numb	per only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LIN	_		:	PAGE	7	OF	15
(check c	nly or	ne)					
X 11a		11b		11c	12		
13		14		15	16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

NAME OF COMMITTEE (In Full) North Carolina Hospital Association P Full Name (Last, First, Middle Initial) Mr. J. William Bill Paugh FACHE Mailing Address 501 Mill Road City State Goldsboro NC FEC ID number of contributing federal political committee	Date of Receipt Date of Receipt
Mr. J. William Bill Paugh FACHE Mailing Address 501 Mill Road City State Goldsboro NC	Zip Code
Goldsboro NC	Zip Code 27534-8976 Transaction ID : 21000509 Amount of Each Receipt this Period
Goldsboro NC	27534-8976 Amount of Each Receipt this Period
FEC ID number of contributing	300.00
federal political committee.	
Name of Employer Occupa	ion
	at and Chief Executive Officer
Receipt For: Primary General Other (specify) ▼ Aggreg	ate Year-to-Date ▼ 300.00
Full Name (Last, First, Middle Initial) 3. Mr. William Mahone V	Date of Receipt
Mailing Address 703 Stoney Brook Drive	M = M / D = D / Y = Y = Y
City State	Zip Code 04 12 2013 Transaction ID : 21000623
Roanoke Rapids NC	27870-3167 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	300.00
	ion t and Chief Executive Officer
Receipt For: Primary General Other (specify) ▼	ate Year-to-Date ▼ 300.00
Full Name (Last, First, Middle Initial)	
Mr. G Raymond Leggett III Mailing Address 2312 Crestview Drive	Date of Receipt Man / Date / Yangara
City State New Bern NC	Zip Code Transaction ID : 21000659 28562-9060 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	225.00
Name of Employer Occupa	ion
- Caronina Lact From System	nt and Chief Executive Officer
Receipt For: Primary General Other (specify) ▼ Aggreg	ate Year-to-Date ▼ 225.00
SUBTOTAL of Receipts This Page (optional)	825.00

Use separate schedule(s) for each category of the

	_		_	MBER	:	PAGE	:	8	OF	15
(0	che	ck only	or	ne)						
	X	11a		11b		11c		12		
		13		14		15		16	;	17

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) North Carolina Hospital Association Political Action Committee - Federal Full Name (Last, First, Middle Initial) Mr. Jeffrey S Miller Date of Receipt Mailing Address 408 Hillcrest Drive 04 2013 18 City Zip Code State Transaction ID: 21000689 NC High Point 27262-2936 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation President and Chief Executive Officer High Point Regional Health System Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Timothy Timothy Rice Date of Receipt Mailing Address 4600 Jefferson Wood Court 04 18 2013 City State Zip Code Transaction ID: 21000705 Greensboro NC 27410-3552 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Cone Health Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Jimm Bunch Date of Receipt Mailing Address 2275 Majestic View Court 04 24 2013 City Zip Code State Transaction ID: 21000783 NC Hendersonville 28791 Amount of Each Receipt this Period FEC ID number of contributing 666.60 С federal political committee. Name of Employer Occupation President and Chief Executive Officer Park Ridge Health Receipt For: Aggregate Year-to-Date ▼ Primary General 666.60 Other (specify) 1266.60 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Detailed Summary Page

ı	FOR LINE	NUMBER	: PAGE	9 OF	15
ı	(check on	ly one)			
	X 11a	11b	11c	12	
	13	14	15	16	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) North Carolina Hospital Associ	ciation Political Action Committee -	Federal
Full Name (Last, First, Middle Initial) Mr. Kevin W Sowers RN, MSN, F Mailing Address 1022 Homer Street		Date of Receipt
City Durham	State Zip Code NC 27707-1641	05 09 2013 Transaction ID : 21000961
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer Duke University Hospital Receipt For:	Occupation President Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Ms. Denise B. Mihal RN, BSN, M Mailing Address 1085 Sea Bourn Way		Date of Receipt
City Sunset Beach	State Zip Code NC 28468-4820	Transaction ID : 21000987 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Novant Health	Occupation Sr. VP/COO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. John G Currin Jr		Date of Receipt
Mailing Address 211 Travis Lane City	State Zip Code	05 15 2013
Gibsonville	NC 27249-3304	Transaction ID : 21001073 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Alamance Regional Medical Center Receipt For:	Occupation CEO Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional)	>	900.00
TOTAL This Period (last page this line numb	per only)	

Use separate sched for each category of Detailed Summary

dule(s)	FOR LINE		PAGE	10 OF	10
of the	(check only	one)			
Page	X 11a	11b	11c	12	
9	13	14	15	16	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

Full Name (Last, First, Middle Initial) Ms. Sandra Danoff Mailing Address 7506 Trevanion Avenue		Date of Receipt 05 15 2013
City	State Zip Code	Transaction ID : 21001149
Pittsburgh	PA 15218-1243	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	300.00
Name of Employer	Occupation	
Duke University Hospital	SVP Strategy	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. Henry Hawthorne	'	Date of Receipt
Mailing Address 1310 James B White Hwy	N	M = M / D = D / Y = Y = Y
City	State Zip Code	05 16 2013 Transaction ID : 21001289
Whiteville	NC 28472-8949	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	360.00
Name of Employer Carolinas HealthCare System	Occupation Hospital CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	
Full Name (Last, First, Middle Initial)	1	
Dr. Ronald A. Paulus MD		Date of Receipt
Mailing Address 62 Beadle Lane	7. 0	05 16 7 2013
City Asheville	State Zip Code NC 28803-8907	Transaction ID : 21001293 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	360.00
Name of Employer	Occupation	
Mission Hospital	President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	360.00	

	FOR	LINE	NU	MBER	:	PAGE	•	11	OF
Use separate schedule(s)	(chec	k only	or	ne)					
for each category of the Detailed Summary Page	X	11a		11b		11c		12	
,g		13		14		15		16	

15

	tatements may not be sold or used by any personame and address of any political committee to	
NAME OF COMMITTEE (In Full)	Con Bulliant And Co. 199	- 11
/ North Carolina Hospital Associa	tion Political Action Committee - F	ederal
Full Name (Last, First, Middle Initial) Ms. Jill Hoggard Green		Date of Receipt
Mailing Address 12 Dayflower Drive		05 16 2013
City	State Zip Code	Transaction ID: 21001329
Asheville	NC 28803-9618	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	360.00
Name of Employer	Occupation	
Mission Health System	President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	360.00	
Full Name (Last, First, Middle Initial) Mr. Dennis J Phillips		Date of Receipt
Mailing Address 4310 - 4th Street Circle NW		05 29 2013
City	State Zip Code	Transaction ID : 21001351
Hickory	NC 28601-9021	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	300.00
Name of Employer Carolinas Medical Center	Occupation	
	Executive Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) C. Mrs. Joann Anderson		Date of Receipt
Mailing Address P O Box 1508		05 30 _2013 _
City	State Zip Code	Transaction ID: 21001489
Lumberton	NC 28359-1508	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	
Southeastern Health	President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional)		960.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 12 OF Use separate schedule(s) for each category of the Detailed Summary Page

(0	che	ck only	or	ıe)			
	X	11a		11b	11c	12	
		13		14	15	16	17

Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may not be sold or used by any per the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) North Carolina Hospital Asso	ciation Political Action Committee -	Federal
Full Name (Last, First, Middle Initial) Mr. Mike Stevenson		Date of Receipt
Mailing Address 1711 Mission Road		06 06 2013
City	State Zip Code	Transaction ID: 21001587
Murphy	NC 28906-3776	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer	Occupation	+
Murphy Medical Center	Administrator	
Receipt For:		+
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	225.00	
Full Name (Last, First, Middle Initial) Mr. Richard E Hudson FACHE		Date of Receipt
Mailing Address 3313 Queensferry Drive, N		06 06 2013
City	State Zip Code	Transaction ID: 21001629
Wilson	NC 27896-9302	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	210.00
Name of Employer	Occupation	1
Wilson Medical Center	President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	210.00	
Full Name (Last, First, Middle Initial) . Ms. Phyllis A Wingate	ı	Date of Receipt
Mailing Address 6005 Willowood Road		06 13 2013
City	State Zip Code	Transaction ID: 21001707
Kannapolis	NC 28081-6702	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	+
Carolinas Medical Center-NorthEast	Division President	
Receipt For:	Aggregate Year-to-Date ▼	+
Primary General	Aggregate real-to-bate ¥	
Other (specify)	300.00	
SUBTOTAL of Receipts This Page (optional)	585.00
TOTAL This Period (last page this line num	her only)	

FOR LINE NUMBER: PAGE 13 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

15

Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) North Carolina Hospital Association Political Action Committee - Federal Full Name (Last, First, Middle Initial) Mr. Jeffrey N. Sackrison FACHE Date of Receipt Mailing Address 1004 Quail Run 2013 City Zip Code State Transaction ID: 21001737 NC Edenton 27932-9200 Amount of Each Receipt this Period FEC ID number of contributing 210.00 federal political committee. Name of Employer Occupation Vidant Chowan Hospital President Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Paul S Franz Date of Receipt Mailing Address 1320 Fillmore Avenue, Unit 413 06 19 2013 City State Zip Code Transaction ID: 21001889 Charlotte NC 28203-5895 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Carolinas HealthCare System **Executive Vice President Operations** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) Mr. Linwood Jones Date of Receipt Mailing Address 4501 Eliot Place 06 20 2013 City Zip Code State Transaction ID: 21001973 NC Raleigh 27609-6019 Amount of Each Receipt this Period FEC ID number of contributing 300.00 С federal political committee. Name of Employer Occupation General Counsel North Carolina Hospital Association Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 810.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:

(check only one)

X 11a 11b 11

FOF	R LINE	NU	MBER	:	PAGE	 14	OF	15	
(che	ck only	or	ne)						
×	11a		11b		11c	12			
	13		14		15	16		17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

or for commercial purposes, other than u	sing the name and address of any political committee to	o solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)	esociation Political Action Committee	Fodoral			
/ North Carolina Hospital As	ssociation Political Action Committee -	reuerai			
Full Name (Last, First, Middle Initial) A. Mr. Hugh H. Tilson Jr.		Date of Receipt			
Mailing Address 1305 College Place		06 20 2013			
City	State Zip Code	Transaction ID : 21001981			
Raleigh	NC 27605-1718	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	300.00			
Name of Employer	Occupation				
North Carolina Hospital Association	Senior Vice President				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00				
Full Name (Last, First, Middle Initial)	I	Date of Receipt			
Mailing Address		M M / D D / Y Y Y Y Y			
City	City State Zip Code				
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period			
Name of Employer	Occupation				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼				
Full Name (Last, First, Middle Initial)	•	Date of Receipt			
Mailing Address		M = M / D = D / Y = Y = Y			
City	State Zip Code	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	Table of East Nosopi and Follow			
Name of Employer					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼				
SUBTOTAL of Receipts This Page (opti	onal)	300.00			
		7500.00			
TOTAL This Period (last page this line	number only)	7566.60			

ľ

Use separate schedule(s) for each category of the Detailed Summary Page 21 to 22 22 28 28 28 28 28 28	SCHEDULE B (FEC Form 3X)		FOR LINE N	NE NUMBER: PAGE 15 OF 15				
Detailed Summary Page	ITEMIZED DISBURSEMENTS	IZED DISBURSEMENTS Use separate schedule(s) (check of the separate schedule)						
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) North Carollina Hospital Association Political Action Committee - Federal Full Name (Last, First, Middle Initial) A HAPAC-American Hospital Association Federal PAC Mailing Address 325 Seventh Steet, N.W. Suite 700 City State Zip Code Washington AHAPAC-American Hospital Association Federal PAC Office Sought Full Name (Last, First, Middle Initial) A HAPAC-American Hospital Association Federal PAC Mailing Address 325 Seventh Street, N.W. Suite 700 City State Zip Code Primary General Primary Gene								
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) North Carolina Hospital Association Political Action Committee - Federal Full Name (Last, First, Middle Initial) 4. AHAPAC-American Hospital Association Federal PAC Mailing Address 325 Seventh Street, N.W. Sulte 700 City Slate Zip Code Disbursement Primary General President PAC Contribution City Slate: Zip Code Disbursement Primary General President Disbursement State: Disfrict: Full Name (Last, First, Middle Initial) 3. AHAPAC-American Hospital Association Federal PAC Mailing Address 225 Seventh Street, N.W. Suite 700 City Slate Zip Code Washington AHAPAC-American Hospital Association Federal PAC Office Sought: House Disbursement For: Disfrict: Full Name (Last, First, Middle Initial) City State Zip Code Primary General President Disbursement Tip President Cother (specify) ▼ Transaction ID : 20680491 Transaction ID : 20680491 Transaction ID : 20680491 Amount of Each Disbursement this Period Candidate Name AHAPAC-American Hospital Association Federal PAC Office Sought: House Disbursement For: District: Full Name (Last, First, Middle Initial) Charles of Disbursement Candidate Name Categopoy/ Type District: Full Name (Last, First, Middle Initial) District: Full Name (Last, First, Middle Initial) Condidate Name Disbursement For: District: Full Name (Last, First, Middle Initial) District: Full Name (Last, First, Middl	Any information copied from such Reports and Staten	l nents may not be sold or use						
North Carolina Hospital Association Political Action Committee - Federal Full Name (Last, First, Middle Initial) A. AHAPAC-American Hospital Association Federal PAC Mailing Address 225 Seventh Street, N.W. Sute 700 City State Zip Code DC 20004 Purpose of Disbursement Federal PAC Contribution Candidate Name AHAPAC-American Hospital Association Federal PAC Office Sought House Disbursement For: Sunday Disbursement For: Sunday Disbursement State: District Full Name (Last, First, Middle Initial) State Disbursement Disburs								
A HAPAC-American Hospital Association Federal PAC Mailing Address 325 Seventh Street, N.W. Suite 700 City State Zip Code Washington DC 20004 Purpose of Dibbursement Federal PAC Contribution Candidate Name AHAPAC-American Hospital Association Federal PAC Office Sought: Full Name (Last, First, Middle Initial) AHAPAC-American Hospital Association Federal PAC Office Sought: Full Name (Last, First, Middle Initial) AHAPAC-American Hospital Association Federal PAC Office Sought: Full Name (Last, First, Middle Initial) AHAPAC-American Hospital Association Federal PAC Office Sought: Full Name (Last, First, Middle Initial) AHAPAC-American Hospital Association Federal PAC Office Sought: Full Name (Last, First, Middle Initial) Candidate Name AHAPAC-American Hospital Association Federal PAC Office Sought: Full Name (Last, First, Middle Initial) Candidate Name Candid	, ,							
A HAPAC-American Hospital Association Federal PAC Mailing Address 325 Seventh Street, N.W. Suite 700 City State Zip Code Washington DC 20004 Purpose of Disbursement Federal PAC Contribution Candidate Name AHAPAC-American Hospital Association Federal PAC City State Disbursement This Page (optional) Amount of Each Disbursement this Period Category/ Federal PAC Contribution Transaction ID : 20680458 Amount of Each Disbursement this Period Candidate Name AHAPAC-American Hospital Association Federal PAC City State Zip Code Washington DC 20004 Purpose of Disbursement State: Disbursement Disbursement DC 20004 Transaction ID : 20680491 Federal PAC Contribution Date of Disbursement Transaction ID : 20680491 Federal PAC Contribution Transaction ID : 20680491 Federal PAC Contribution Date of Disbursement District: Disbursement For: Senate President Other (specify) ▼ Date of Disbursement this Period Category/ Figure Category/ Figure Category/ G1000.00 Date of Disbursement Candidate Name Candidate Nam	North Carolina Hospital Association	n Political Action Con	nmittee - F	ederal				
Mailing Address 325 Seventh Street, N.W. Suite 700 City State Zip Code DC 20004 Purpose of Disbursement Federal PAC Contribution Candidate Name AHAPAC-American Hospital Association Federal PAC Mailing Address 325 Seventh Street, N.W. Suite 700 City State Zip Code Disbursement For: Senate President Other (specify) ▼ Full Name (Last, First, Middle Initial) AHAPAC-American Hospital Association Federal PAC Mailing Address 325 Seventh Street, N.W. Suite 700 City State Zip Code Washington DC 20004 Purpose of Disbursement 2013 Federal PAC contribution Transaction ID : 20680491 Amount of Each Disbursement 01 23 2013 Transaction ID : 20680491 Amount of Each Disbursement this Period Category' Type Office Sought: House Disbursement For: Senate President District: Full Name (Last, First, Middle Initial) Category' Type Office Sought: House Disbursement For: Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Candidate Name City State Zip Code Candidate Name City State Z	_			5 . (5)				
Mailing Address 325 Seventh Street, N.W. Suite 700 City State Zip Code DC 20004 Washington DC 20004 Purpose of Disbursement Federal PAC Category' AHAPAC-American Hospital Association Federal PAC Office Sought: House Primary General PAC City State Zip Code Dc 20004 Fresident Street, N.W. Suite 700 City State Zip Code Dc 20004 Fresident Street, N.W. Suite 700 City State Zip Code Disbursement His Period Category' AHAPAC-American Hospital Association Federal PAC Office Sought: House Disbursement To: Senate Primary General PAC Contribution Category' Mashington DC 20004 Frederal PAC Contribution Transaction ID: 20580491 Frederal PAC Contribution Date of Disbursement Office Sought: House Primary General PAC Office Sought: House Primary General PAC Category' State Zip Code Disbursement Fer: Senate President Other (specify) ▼ State Zip Code Type Office Sought: House Primary General PAC Category' State Zip Code Primary General PAC Contribution Category' Cat	A. AHAPAC-American Hospital Assoc	ciation Federal PAC						
City State Zip Code DC 20004 Washington DC 20004 Furpose of Disbursement Federal PAC Contribution Candidate Name AHAPAC-American Hospital Association Federal PAC Office Sought: House Disbursement For: Sound Rame AHAPAC-American Hospital Association Federal PAC Federal PAC Contribution Category/ Type Federal PAC Contribution Date of Disbursement Office Sought: House Disbursement For: Senate Primary General PAC Office Sought: House Disbursement For: Senate Primary General PAC Full Name (Last, First, Middle Initial) Amount of Each Disbursement this Period Caregory/ Type Category/ Type Full Name (Last, First, Middle Initial) Category/ Type Category/ Ty	Mailing Address 325 Seventh Street, N.W.			01 23	2013			
Washington Purpose of Disbursement Federal PAC Contribution Candidate Name AHAPAC-American Hospital Association Federal PAC Office Sought: House Senate Prisident Other (specify) ▼ Full Name (Last, First, Middle Initial) Candidate Name AHAPAC-American Hospital Association Federal PAC Mailing Address 325 Seventh Street, N.W. Suite 700 City State Zip Code Washington DC 20004 Purpose of Disbursement Candidate Name AHAPAC-American Hospital Association Federal PAC Office Sought: House Disbursement	-	State Zin Code						
Purpose of Disbursement Federal PAC Contribution Candidate Name AHAPAC-American Hospital Association Federal PAC Office Sought:	-	· ·		Transaction ID: 2	0680458			
AHAPAC-American Hospital Association Federal PAC Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) AHAPAC-American Hospital Association Federal PAC Mailing Address 325 Seventh Street, N.W. Suite 700 City State Zip Code Washington DC 20004 Purpose of Disbursement 2013 Federal PAC Ontribution Office Sought: House Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) AHAPAC-American Hospital Association Federal PAC Office Sought: House Disbursement Primary General PAC Ontribution Candidate Name AHAPAC-American Hospital Association Federal PAC Office Sought: House Disbursement For: Senate President District: Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate President Disbursement This Period Candidate Name Category/ Type Office Sought: House Disbursement For: Senate President Disbursement This Period Candidate Name Category/ Type Office Sought: House Disbursement For: Senate President Disbursement This Period Other (specify) ▼ State: District: Primary General P	Purpose of Disbursement	2000.						
AHAPAC-American Hospital Association Federal PAC Office Sought: House Primary General President			011	Amount of Each Dis	sbursement this Period			
Office Sought: House Disbursement For: Full Name (Last, First, Middle Initial) State: District: Primary General PAC Mailing Address AHAPAC-American Hospital Association Federal PAC Mailing Address 325 Seventh Street, N.W. Suite 700 City State Zip Code Washington DC 20004 Purpose of Disbursement 2013 Federal PAC Contribution Candidate Name AHAPAC-American Hospital Association Federal PAC Office Sought: House Disbursement For: Full Name (Last, First, Middle Initial) Category/ Type Office Sought: House Disbursement For: Candidate Name Category/ Type Office Sought: House Disbursement For: Candidate Name Category/ Type Office Sought: House Disbursement For: Candidate Name Category/ Type Office Sought: House Disbursement For: Candidate Name Office Sought: House Disbursement For: Candidate Name Category/ Type Office Sought: House Disbursement For: Candidate Name Category/ Type Office Sought: House Disbursement For: Candidate Name Category/ Type Office Sought: House Disbursement For: Candidate Name Category/ Type Office Sought: House Disbursement For: Senate President Disbursement this Period Amount of Each Disbursement this Period Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Senate President Disbursement For: Senate Presid		ion Fodorel DAC			61000.00			
Senate President Other (specify) State: District: Full Name (Last, First, Middle Initial) 3. AHAPAC-American Hospital Association Federal PAC Mailing Address 325 Seventh Street, N.W. Suite 700 City State Zip Code Washington DC 20004 Purpose of Disbursement 2013 Federal PAC contribution Candidate Name AHAPAC-American Hospital Association Federal PAC Other (specify) Full Name (Last, First, Middle Initial) Category' Type Office Sought: House Disbursement Other (specify) Full Name (Last, First, Middle Initial) Candidate Name City State Zip Code Disbursement For: Senate President Other (specify) Full Name (Last, First, Middle Initial) Category' Type Office Sought: House Disbursement For: Senate President Disbursement For: Other (specify) Candidate Name Category' Type Office Sought: House Disbursement For: Senate President Disbursement For: Other (specify) Category' Type Office Sought: House Disbursement For: Other (specify) Category' Type Office Sought: House Disbursement For: Other (specify) Category' Type Office Sought: House Disbursement For: Other (specify) Category' Type Office Sought: House Disbursement For: Disbursement For: Other (specify) Category' Type Office Sought: House Disbursement For: Disbursement Disbursement For: Disbursement Disbursement Type Disbursement Disbur	•		Туре		0.000.00			
State: District: Other (specify) ▼ Full Name (Last, First, Middle Initial) 3. AHAPAC-American Hospital Association Federal PAC Mailing Address 325 Seventh Street, N.W. Suite 700 City State Zip Code Washington DC 20004 Purpose of Disbursement 2013 Federal PAC ontribution Candidate Name AHAPAC-American Hospital Association Federal PAC Other (specify) ▼ Full Name (Last, First, Middle Initial) State: District: Candidate Name Category/ Other (specify) ▼ Mailing Address City State Zip Code Purpose of Disbursement For: 2013 Federal PAC contribution Category/ Type Office Sought: House Disbursement For: 2013 Federal PAC contribution Category/ Type Office Sought: House Disbursement For: 2013 Federal PAC contribution Category/ Type Office Sought: House Disbursement For: 2013 Federal PAC contribution Category/ Type Office Sought: House Disbursement For: 2013 Federal PAC contribution Date of Disbursement In Feriod Category/ Type Office Sought: House Disbursement For: 2013 Federal PAC contribution Category/ Type Office Sought: House Disbursement For: 2013 Federal PAC contribution Category/ Type Office Sought: House Disbursement For: 2013 Federal PAC contribution Category/ Type Office Sought: House Disbursement For: 2013 Federal PAC contribution Category/ Type Office Sought: House Disbursement For: 2013 Federal PAC contribution Category/ Type Office Sought: House Disbursement For: 2013 Federal PAC contribution Category/ Type Office Sought: House Disbursement For: 2013 Federal PAC contribution Category/ Type Office Sought: House Disbursement For: 2013 Federal PAC contribution				Fodoral BAC Contrib	ution			
AHAPAC-American Hospital Association Federal PAC Mailing Address 325 Seventh Street, N.W. Suite 700 City State Zip Code Washington DC 20004 Purpose of Disbursement 2013 Federal PAC Office Sought: House President President President Candidate Name AHAPAC-American Hospital Association Federal PAC Other (specify) ▼ State: Disbursement Candidate Name Candidate Name Clast, First, Middle Initial) Candidate Name Clast, First, Middle Initial) State: Disbursement For: Category/ Type Office Sought: House Primary General PAC Other (specify) ▼ State: Disbursement For: Category/ Type Office Sought: House Primary General PAC Other (specify) ▼ State: Disbursement For: Category/ Type Office Sought: House Primary General PAC Other (specify) ▼ State: Disbursement For: Category/ Type Office Sought: House Primary General PAC Other (specify) ▼ State: Disbursement For: Category/ Type Office Sought: House Primary General PAC Other (specify) ▼ State: District: Disbursement For: Category/ Type Office Sought: House Primary General PAC Other (specify) ▼ Substotal of Disbursement This Page (optional)				rederal FAC Continu	duon			
AHAPAC-American Hospital Association Federal PAC Mailing Address 325 Seventh Street, N.W. Suite 700 City State Zip Code Washington DC 20004 Purpose of Disbursement 2013 Federal PAC contribution Candidate Name AHAPAC-American Hospital Association Federal PAC Type Office Sought: House Primary General Other (specify) Purpose of Disbursement Candidate Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Office Sought: House Disbursement For: Candidate Name Candidate Name Office Sought: House Disbursement For: Senate Primary General Category/ Type Office Sought: House Disbursement For: Candidate Name Office Sought: House Disbursement For: Senate Primary General Other (specify) Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Type Office Sought: House Primary General Other (specify) Type	State: District:							
Mailing Address 325 Seventh Street, N.W. Suite 700 City State Zip Code DC 20004 Purpose of Disbursement 2013 Federal PAC contribution Candidate Name AHAPAC-American Hospital Association Federal PAC Office Sought: House Primary General City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: State: District: Substrate Primary General Other (specify) ▼ 122000.00	,							
Mailing Address 325 Seventh Street, N.W. Suite 700 City Washington DC 20004 Purpose of Disbursement 2013 Federal PAC contribution Candidate Name AHAPAC-American Hospital Association Federal PAC Office Sought: President State: District: Full Name (Last, First, Middle Initial) Candidate Name City State Disbursement For: State: District: Full Name (Last, First, Middle Initial) City State Disbursement Candidate Name Category/ Type Amount of Each Disbursement Amount of Each Disbursement Amount of Each Disbursement Category/ Type Amount of Each Disbursement Category/ Type Office Sought: District: Senate Primary General Other (specify) ▼ State: District: Substrate Disbursement For: Senate Primary General Other (specify) ▼ State: District: Substrate: District: Substrate Disbursement For: Senate Primary General Other (specify) ▼ Amount of Each Disbursement this Period Amount of Each Disbursement this Period Amount of Each Disbursement this Period	B. AHAPAC-American Hospital Assoc	ciation Federal PAC		Date of Disburseme	ent			
Suite 700 City Washington	Molling Address 205.0							
Washington Purpose of Disbursement 2013 Federal PAC contribution Candidate Name AHAPAC-American Hospital Association Federal PAC Office Sought: House Primary General President City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Date of Disbursement Candidate Name Category/ Type Date of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ State: District: Substitution Date of Disbursement Amount of Each Disbursement this Period Amount of Each Disbursement this Period Amount of Each Disbursement this Period Disbursement For: Senate Primary General Other (specify) ▼ State: District: Substitution Amount of Each Disbursement this Period Amount of Each Disbursement this Period Amount of Each Disbursement this Period		Suite 700						
Purpose of Disbursement 2013 Federal PAC contribution Candidate Name AHAPAC-American Hospital Association Federal PAC Office Sought: House Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Date of Disbursement Category/ Type Date of Disbursement Category/ Type Amount of Each Disbursement this Period Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Suppose of Disbursement For: Senate Primary General Other (specify) ▼ State: District: Suppose of Disbursement This Page (optional)	•	· ·		Transaction ID: 2	20680491			
2013 Federal PAC contribution Candidate Name AHAPAC-American Hospital Association Federal PAC Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Category/ Type Disbursement For: Category/ Type 2013 Federal PAC contribution Date of Disbursement Candidate Name Candidate Name Candidate Name Disbursement For: Category/ Type Date of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Disbursement For: Senate Primary General Other (specify) ▼ State: District: SUBTOTAL of Disbursements This Page (optional)	•	20004						
AHAPAC-American Hospital Association Federal PAC Office Sought:			011	Amount of Each Dis	sbursement this Period			
AHAPAC-American Hospital Association Federal PAC Office Sought: House Senate Primary General Other (specify) Tull Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) Office Sought: House Senate Primary General Other (specify) State: District: Substitution Date of Disbursement Amount of Each Disbursement this Period Category/ Type Office Sought: President Other (specify) State: District:			Category/		04000.00			
Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Office Sought: House Senate Primary General Other (specify) State: District: Substotal of Disbursements This Page (optional)	•				61000.00			
State: District: Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Category/ Type Office Sought: House Primary General Primary General Other (specify) State: District: Substotal of Disbursement For: Senate Primary General Other (specify) State: District: Substotal of Disbursements This Page (optional)								
State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Office Sought: House Primary General President President State: District: SUBTOTAL of Disbursements This Page (optional)		,		2013 Federal PAC c	ontribution			
Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Primary General Other (specify) ▼ State: District: SUBTOTAL of Disbursements This Page (optional)		other (specify)						
Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Primary General Other (specify) ▼ State: District: SUBTOTAL of Disbursements This Page (optional)	Full Name (Last, First, Middle Initial)							
City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Subtrotal of Disbursements This Page (optional)	c.			Date of Disburseme	ent			
City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Substitute State: Disbursements This Page (optional)				M M / D D	/ Y Y Y Y Y			
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Substruct: Primary General Other (specify) Substruct: 122000.00	Mailing Address							
Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Substruct: Amount of Each Disbursement this Period Amount of Each Disbursement this Period Amount of Each Disbursement this Period	City	State Zip Code						
Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Substruct: Amount of Each Disbursement this Period Amount of Each Disbursement this Period Amount of Each Disbursement this Period	Purpose of Disbursement							
Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: 122000.00	. ,							
Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ Subtrotal of Disbursements This Page (optional)	Candidate Name		7 111104111 07 24011 210					
State: District: Other (specify) ▼ SUBTOTAL of Disbursements This Page (optional)	Office Sought: House Disbursen	nent For:	- 7					
State: District: SUBTOTAL of Disbursements This Page (optional)	Senate	Primary General						
SUBTOTAL of Disbursements This Page (optional)		Other (specify) ▼						
33310 TAL OF DISDUISEMENTS THIS Page (Optional)	State: District:							
33310 TAL OF DISDUISEMENTS THIS Page (Optional)	CURTOTAL - (Dist				122000 00			
TOTAL This Period (last page this line number only)	SUBIUIAL of Disbursements This Page (optional)		······		12200.00			
	TOTAL This Period (last page this line number only)				122000.00			